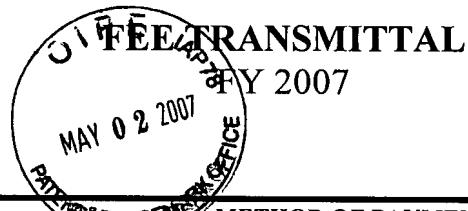


EXPRESS MAIL MAILING LABEL NO.EV931176639US



Complete if Known	
Application No.	09/955,746
Docket No.	AIG-005
Filing Date	September 18, 2001
First Named Inventor	Robert Parisi
Group No.	3626
Examiner Name	Robert D. Rines
Confirmation No.	9490

METHOD OF PAYMENT

Payment Enclosed:
 Check Money Order Other

The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3081.

Required Fees (copy of this sheet enclosed).
 Additional fee required under 37 CFR 1.16 and 1.17.
 Overpayment Credit.

Applicant claims small entity status. (deduct 50%)

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Filing	Search	Examination	Fee Paid
Utility	300	500	200	
Design	200	100	130	
Plant	200	300	160	
Reissue	300	500	600	
Provisional	200	0	0	

Small Entity Discount

1. TOTAL **0**

2. EXCESS CLAIM FEES

	Fee	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent.	200	100

Total Claims

Extra Claims

Fee Paid (\$)

- 20 or HP= x \$ =

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee Paid (\$)
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- 3 or HP= x \$ =

HP = highest number of total claims paid for, if greater than 3

Multiple Dependent Claims	Fee(\$)	Small Entity fee (\$)	Fee Paid (\$)
	360	180	

2. TOTAL: **0**

3. APPLICATION SIZE FEE

If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Additional 50 or fraction thereof	Fee (\$)	Fee Paid
-100=	0	round up to a whole number	x	= 0.00

3. TOTAL: **0**

CORRESPONDENCE ADDRESS

Direct all correspondence to:

Patent Administrator
 Proskauer Rose LLP
 One International Place
 Boston, MA 02110
 Tel. No.: (617) 526-9600
 Fax No.: (617) 526-9899

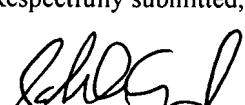
FEE CALCULATION (continued)			
4. ADDITIONAL FEES			
Large Entity	Small Entity		
Fee (\$)	Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	Request for ex parte re-examination	
120	60	Extension for reply within 1 st mo.	
450	225	Extension for reply within 2 nd mo.	
1,020	510	Extension for reply within 3 rd mo.	1,020.00
1,590	795	Extension for reply within 4 th mo.	
2,160	1,080	Extension for reply within 5 th mo.	
500	250	Notice of Appeal	
500	250	Filing a brief in support of an appeal	
1,000	500	Request for oral hearing	
400	0	Petitions to the Director	
180	180	Submission of IDS	
790	395	Filing a submission after final rejection (37 CFR 1.129(a))	790.00
790	395	For each additional invention to be examined (37 CFR 1.129(b))	
100	100	Certificate of Correction for applicant's error	
130	65	Submission of Terminal Disclaimer	
Other fee (Specify)			
Other fee (Specify)			
4. TOTAL:			\$1,810.00

TOTAL AMOUNT SUBMITTED

\$1,810.00

SIGNATURE BLOCK

Respectfully submitted,


 Joseph A. Capraro, Jr.
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